



November - March

**Registration Deadline** Friday, October 21, 2016

#### **LEAGUE PHILOSOPHY**

This is a <u>recreational</u> league! Our philosophy is that every child plays, regardless of skill, and that all participants have **FUN** and learn the game of basketball. We emphasize team play, cooperation, good sportsmanship, courtesy, respect to all players coaches, officials, coordinators, and parents.

#### **PRACTICES**

Practices will be determined by the coaches' availability. Each team will practice one night during the week and once on the weekend, either Saturday or Sunday. Weekday practice times will be at 6:00 p.m. or 7:00 p.m. However, some teams in upper grades may practice at 8:00 p.m. Weekend practices will be between 9:00 a.m. and 6:00 p.m. Once games begin, teams will only receive their week night practice, with games being on the weekend. Specific practice times can not be determined at this time.

Practices will be begin the weekend of November 19

# **GAMES**

League play begins the weekend of January 7. Games will be played on Saturdays between 8:00pm - 6:00pm and Sundays 12:00pm-6:00pm There will be some weeknight games if needed.

Specific game times for each grade level cannot be determined at this time. Once the number of teams have been determined, a game schedule will be created and distributed to the coaches mid-December.

#### **MEDALS**

Medals will be provided for every child registered in 1st thru 4th Grade.

#### **REFUND POLICY**

100% refund if request is made prior to first practice.

50% refund if request is made less than two weeks before the first game.

0% refund once games have started.

## **REGISTRATION**

Every child that is registered before the deadline is guaranteed a place in the league.

# Deadline for registration is Friday, October 21, 2015

All players <u>not</u> registered by October 21 will be placed on a waiting list and added to teams if openings are available. A **\$30** late fee will be charged for any late registrations.

Please make every effort to register before the deadline! Placement on a team is <u>not</u> <u>guaranteed</u> if the registration is late.

# **FEES**

\$90	Clayton Resident/Student
\$30	Late Fee if register after Oct. 23

### **TEAM SELECTION PROCESS**

The City of Clayton will divide players based on school.

Our goal is to have balanced teams. Therefore, individual requests for particular coaches or friends are discouraged.

Your cooperation is very much appreciated, as the team selection process is difficult enough without numerous requests. There is no process that guarantees total parity, but we will do our best to come as close to it as possible!

# **INCLUSION SERVICES**

If your child needs assistance to participant in this league, that can be provided. For additional information contact Ann Jacobs at 314-290-8505.

#### **TO REGISTER**

Call 314-290-8500 to register by phone with a credit card or complete the form on the right and mail it with payment (check payable to The City of Clayton) to:

Clayton Parks and Recreation Youth Basketball League 50 Gay Avenue Clayton, MO 63105

Please use the following code when registering by phone or when completing the attached registration form.

	Boys	Girls
Grade 1	19882	19883
Grade 2	19884	19885
Grade 3	19886	19887
Grade 4	19888	19889
Grade 5	19890	19891
Grade 6	19892	19893
Grade 7	19894	19895
Grade 8	19896	19897

# **COACHES**

Our program is dependent on volunteers. We are in search of people who will make a commitment to both the children and to the program. To ensure a quality experience, many individuals' knowledge, talent and energy are needed. The program needs coaches and assistant coaches. If you wish to help, please complete the coaching section of your child's registration form.

Individuals who sign up to be a head coach will receive their child's registration free. Any Individual who sign up to be an assistant coach will receive 50% off the child's registration cost.

Coaches will be required to submit to a background check.

# Current school Birth date Gender Grade Code (Please complete form in its entirety.) $^{'}_{2}$ Alt. phone Parent's/Guardian's e-mail address Parent's/Guardian's name Primary phone Player's name

2016-2017 CLAYTON PARKS AND RECREATION

curred while participating in or as a spectator at a City of Clayton sponsored activity. I have read and understand the registration and refund policies. REGISTRATION IS INVALID WITHOUT SIGNATURE. I also agree, as a participant or as a parent of a minor of Clayton and its representatives from claims for damages and/or injuries inparticipant, to grant full permission to the City of Clayton to use my name, photograph, videotape or recordings for any publicity promotion purposes without obligation or liability to me or my family. My family and I hereby waive and release the City SIGNATURE

ASSISTANT COACH	Primary phone	Alt. phone	receive 50% off child's registration
HEAD COACH			<b>Assistant Coaches</b>
I WOULD LIKE TO VOLUNTEER AS	Volunteer's name	Email	Head Coaches receive child's registration free. Assistant Coaches receive 50% off child's registration

Mail to: Clayton Parks and Recreation, 50 Gay Avenue, Clayton, MO 63105 Make checks payable to: City of Clayton